



The Commonwealth of Massachusetts
William Francis Galvin

Secretary of the Commonwealth, Corporations Division
 One Ashburton Place, 17th floor
 Boston, MA 02108-1512
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TOSHIBA AMERICA INFORAMTION SYSTEM, INC. Summary Screen



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The exact name of the Foreign Corporation: TOSHIBA AMERICA INFORAMTION SYSTEM, INC.

Entity Type: Foreign Corporation

Identification Number: 330338017

Date of Registration in Massachusetts: 04/05/1989

The is organized under the laws of: State: CA Country: USA on: 02/09/1989

Current Fiscal Month / Day: 03 / 31

Previous Fiscal Month / Day: 00 / 00

The location of its principal office:

No. and Street: 9740 IRVINE BLVD.
 City or Town: IRVINE State: CA Zip: 92718 Country: USA

The location of its Massachusetts office, if any:

No. and Street:
 City or Town: State: Zip: Country:

Name and address of the Registered Agent:

Name: C T CORPORATION SYSTEM
 No. and Street: 155 FEDERAL STREET
STE 700
 City or Town: BOSTON State: MA Zip: 02110 Country: USA

The officers and all of the directors of the corporation:

Title	Individual Name First, Middle, Last, Suffix	Address (no PO Box) Address, City or Town, State, Zip Code	Expiration of Term
PRESIDENT	MARK SIMONS	9740 IRVINE BLVD IRVINE, CA 92618 USA	
VICE PRESIDENT	JACK MILLIKEN	9740 IRVINE BLVD IRVINE, CA 92618 USA	
VICE PRESIDENT	TSUTOMU KAGAWA	9740 IRVINE BLVD IRVINE, CA 92618 USA	

VICE PRESIDENT

DAVID HARSHMAN

9740 IRVINE BLVD
IRVINE, CA 92618 USA**business entity stock is publicly traded:** ____**The total number of shares and par value, if any, of each class of stock which the business entity is authorized to issue:**

Class of Stock	Par Value Per Share Enter 0 if no Par	Total Authorized by Articles of Organization or Amendments		Total Issued and Outstanding <i>Num of Shares</i>
		<i>Num of Shares</i>	<i>Total Par Value</i>	
CNP	\$0.00000	1,000	\$0.00	44

☐ Consent ☐ Manufacturer ☐ Confidential Data ☐ Does Not Require Annual Report
☐ Partnership ☒ Resident Agent ☐ For Profit ☐ Merger Allowed

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 Annual Report - Professional
 Application for Reinstatement

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